STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation OF STATE

Return to: Secretary of State, 500 l	E. Capitol, Pierre, SD 57501	
1. TITLE OF NEWSPAPER COISICO GLOBE		2. DATE 9-11-18
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLIS	SHED ANNUALLY 3B AN	NUAL SUBSCRIPTION S 35. 0 + 40.
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE O	F DUBLICATION (Street, Circ	County State and ZID+4 Code
(Not printers) =		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTE	SD 57378-0	2045 Daglas Can
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTI	ERS OR GENERAL BUSINESS	OFFICES OF THE
PUBLISHER (Not printers)	57378-00	UT Durales Counts
6. FULL NAME OF PUBLISHER: Gerri Kaye 7. OWNER (If owned by a corporation, its name and address mu	1 East	CASCO
7. OWNER (If owned by a corporation, its name and address mu	st be stated and list on the back of	f this form the names and
addresses of stockholders owning or holding 1 percent or more	of total amount of stock. If not a	owned by a corporation, the
names and addresses of the individual owners must be given. I	f owned by a partnership or other	unincorporated firm, its name
and address, as well as that of each individual must be given. FULL NAME	COMPLETE MA	ILING ADDRESS
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER	LSC	nic on tiol paid.
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, M	MORTGAGES OR OTHER SEC	ING OR HOLDING I
state. If more space is needed, list on back of this form.	STORE ON STIEN SEC	examples (12 mere are figure, 30
None	,	
50011	AVERAGE NO. COPIES	ACTUAL NO CONTR
9. EXTENT AND NATURE OF CIRCULATION	EACH PRECEDING IN	ACTUAL NO. COPIES ISSUED
	ISSUED PRECEDING 12 MONTHS	NEAREST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	890	715
B.PAID AND/OR REQUESTED CIRCULATION		
 Sales through dealers and carriers, street vendors, and counter sales. 	70	72
Mail Subscription		
(Paid and or requested)	383	602
3. Paid Electronic Copies	0	0
C.TOTAL PAID AND/OR REQUESTED CIRCULATION	11-5	1 - 1
(Sum of 9B1, 9B2 and 9B3.)	453	674
D.FREE DISTRIBUTION	25	OF
I. BY MAIL, CARRIER OR OTHER MEANS	25	25
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	478	699
F, COPIES NOT DISTRIBUTED	1 2	
 Office use, left over, unaccounted, spoiled after printing 	75	16
2. Return from News Agents	0	0
G.TOTAL (Sum of E, F1 and F2 - Should equal total shown in A.)	553	715
Statement must be signed by Publisher, Business Mana		ce of a Notary Public
I swear that the statements made by me are true,	correct, and complete:	
27. K.Oh.		
(Signature) (Title)		
(orginality)	,	(inc)
State of South Dakota	Sworn to before me this 1	_day of <u>Sept.</u> , 20 <u>18</u>
\$	Wendy K. Wilson	
County of Vous (as)) Notary Public	
(Seal)	My commission expires: Aug. 2024	